

ISDH 2004 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Parkview Lagrange HospitalCity: Lagrange County: Lagrange Year: **2004**

Provider Type: Critical Access Hospital

I. Inpatient Care				
Hospital Service Description	Number of Set Up Beds	Number of Discharges	Number of Patient Days	Average Charge Per Discharge
Burn Care	0	0	0	\$0
Cardiac Intensive	3	15	113	\$6,851
ICU Med/Surg	0	0	0	\$0
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	23	610	2,059	\$1,665
Neonatal Intermed	0	0	0	\$0
Obstetrics	7	247	520	\$956
Pediatric	0	0	0	\$0

Psychiatric	0	0	0	\$0
Rehabilitation	0	0	0	\$0
Substance Abuse	21	149	1,869	\$7,112
Swing Beds	NA	70	782	\$2,955
Other Services	0	0	0	NA
Acute Subtotal	51	1,091	5,343	NA
Normal Newborn	8	244	526	\$883

II. Outpatient Visits			
Circulatory System	2,376	Digestive System	1,090
Endocrine System	1,403	Injuries and Poison	2,632
Mental Disorder	326	Musculoskeletal	1,706
Neoplasms	622	Nervous	498
Respiratory	519	Urinary	1,040
Other/Unknown	19,022	Total Visits	21,723
Number of Visits to Emergency Department			5,947
Percent of Emergency Department Visits of Total Visits			27.4%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 66 services. This list of 52 services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment. The other 14 services have been identified in other sections of this report.

N - Ambulance Service (Owned)	N - Alcohol/Drug Service	Y - Anesthesia Services
N - Audiology	Y - Blood Bank	N - Cardiac Cath Lab
N - Cardiac-Thoracic Surgery	N - Chemotherapy Service	N - Chiropractic Service
Y - CT Scanner	N - Dental Service	Y - Dietetic Service
N - Extracorporeal Lithotripter	N - Gerontological Service	N - Home Health Service
N - Hospice	N - Laboratory Anatomical	Y - Laboratory Clinical
Y - Magnetic Resonance (MRI)	Y - Neonatal Nursery	N - Neurosurgical Service
Y - Nuclear Medicine	Y - Occupational Therapy	Y - Operating Room
N - Ophthalmic Surgery	N - Optometric Service	N - Organ Bank
Y - Organ Transplant	N - Orthopedic Surgery	Y - Pharmacy
Y - Physical Therapy	N - PET Imaging	Y - Postoperative Recovery
N - Psychiatric Emergency	N - Psychiatric Child	N - Psychiatric Forensic
N - Psychiatric Geriatric	Y - Radiology Diagnostic	N - Radiology Therapeutic
N - Reconstructive Surgery	Y - Respiratory Care	N - Rehab Inpat CARF
Y- Rehab Inpat Non CARF Acc	N- Rehab Outpatient	N- Renal Dialysis

Y - Social Services	Y - Speech Pathology	Y - Surgical Inpatient
Y - Surgical Outpatient	N - Trauma Center Certified	N - Transplant Cnt Medicare
N - Urgent Care Center		

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported
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